date from the U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

 No additional material will be accepted, or added to an application, unless it is postmarked by the deadline date.

2. Late applications

Applications which do not meet the criteria in the above paragraph of this section are considered late applications and will be returned to the applicant. The Administration for Children and Families shall notify each late applicant that its application will not be considered in the current competition.

3. Extension of deadlines

The Administration for Children and Families may extend the deadline for all applicants because of acts of God such as floods, hurricanes, etc., or when there is a widespread disruption of the mails. However, if ACF does not extend the deadline for all applicants, it may not waive or extend the deadline for any applicant.

(Catalog of Federal Domestic Assistance Program Numbers: 93.612 Native American Programs; 93.581 Improving the Capability of Indian Tribal Governments to Regulate Environmental Quality; and 93.587 Promoting the Survival and Continuing Vitality of Native American Languages.)

Dated: August 30, 1995.

Gary N. Kimble,

Commissioner, Administration for Native Americans.

[FR Doc. 95-22073 Filed 9-6-95; 8:45 am]

BILLING CODE 4184-01-P

Administration for Children and Families

New Child Welfare Waiver
Demonstration Project Proposals
Submitted Pursuant to Section 1130 of
the Social Security Act (the Act); Title
IV-E and IV-B of the Act; Public Law
103-432

AGENCY: Administration for Children and Families, HHS.

ACTION: Notice.

SUMMARY: This notice lists new proposals for child welfare waiver demonstration projects submitted to the Department of Health and Human Services pursuant to **Federal Register**, Volume 60, No. 115, published Thursday, June 15, 1995. Federal approval for the proposals has been requested pursuant to section 1130 of the Social Security Act.

comments: We will accept written comments on these proposals. We will, if feasible, acknowledge receipt of all comments, but we will not provide written responses to comments. We will, however, neither approve nor disapprove any new proposal for at least 30 days after the date of this notice to allow time to receive and consider comments. Direct comments as indicated below.

ADDRESSES: For specific information or questions on the content of a project or requests for copies of a proposal, contact the State contact listed for that project.

Comments on a proposal should be addressed to:

Michael W. Ambrose, Administration on Children, Youth and Families, Children's Bureau, 330 C Street, SW. Mary E. Switzer Building, Room 2068, Washington, D.C. 20201, FAX: (202) 205–9345

SUPPLEMENTARY INFORMATION:

I. Background

Under Section 1130 of the Social Security Act (the Act), the Secretary of Health and Human Services (HHS) may approve child welfare waiver demonstration project proposals with a broad range of policy objectives.

In exercising her discretionary authority, the Secretary has developed a number of policies and procedures for reviewing proposals. On June 15, 1995, we published a notice in the Federal **Register** (Volume 60, No 115, page 31478) that specified (1) the principles that we ordinarily will consider when approving or disapproving demonstration projects under the authority in section 1130 of the Act; (2) the procedures we expect States to use in involving the public in the development of proposed demonstration projects under section 1130; and (3) the procedures we ordinarily will follow in reviewing demonstration proposals. We are committed to a thorough and expeditious review of State requests to conduct such demonstrations.

II. Listing of New Proposals

As part of our procedures, we are publishing a notice in the **Federal Register** of all new proposals. This notice contains summaries of 14 proposals received by July 31, 1995, the date established for the first round of proposals. Each of the proposals contains an assurance that the proposed demonstration effort will be cost neutral to the federal government over the life of the proposed effort; and each proposal contains an evaluation component designed to assess the effectiveness of the project.

The June 15, 1995 **Federal Register** Announcement indicated the Department would give priority consideration to proposals received by July 31, 1995. Further, if ten states had not been approved, additional proposals would be accepted by September 30, 1995 and at the end of each calendar quarter thereafter until ten waiver demonstration projects have been approved. The next date for acceptance of any child welfare waiver demonstration proposals is changed to December 31, 1995.

STATE: CALIFORNIA.

DESCRIPTION: California proposes to extend, and broaden to include the use of federal funds, a planned State Partnership Demonstration Project that will provide direct funding to counties for the implementation of child welfare services. Participating counties would receive from the State a single allocation of funds for family and children's services, rather than using categorical funding streams.

The project would enhance the counties' abilities: to meet families' needs more comprehensively; to increase the focus on outcomes; to provide additional in-home services which will result in less need for out of home care; and to contain costs.

The State anticipates that enhanced flexibility in the use of federal funds, reduced administrative requirements and a new "outcome-oriented oversight role" will improve outcomes for children and families, including more effective prevention services that will reduce the need for out of home care. The State is particularly interested in promoting a whole family foster care program and long term options for children in kinship care.

The State proposes, potentially, to waive a large number of statutory (and regulatory) provisions, which would be based on negotiations among federal, State and local child welfare services officials regarding specific local waiver proposals. For each of many statutory provisions, the state proposes conditionally to "request waiver of this section to the extent necessary to implement the proposed demonstration project." Statutory items include certain title IV-E State plan requirements, title IV-E income eligibility requirements, statutory definitions (including definitions of eligible facilities), requirements regarding adoption assistance payments, required statistical reports, and Independent Living Program eligibility requirements. Regulatory items proposed for waiver include limitation on the sources of state match, cost allocation plan

requirements, general grant administration requirements, fiscal regulations, the State allotment determination formula, payment review and facility licensing standards, and regulations regarding the withholding of federal funds.

CONTACT PERSON: Marjorie Kelly, Deputy Director, Children and Families Services Division, California Department of Social Services, 744 P Street M.S. 19073, Sacramento, CA 95814, (916) 657–2614, (916) 653–1695 (FAX).

STATE: DELAWARE.

DESCRIPTION: Delaware proposes a wavier project which has two components. In the first, the State would use multi-disciplinary teams composed of social workers and substance abuse counselors to address the problem of parental substance abuse that creates risks for children and families. This aspect of the project is designed to reduce the number of children coming into out of home care; to delay entry into care; or to reduce the amount of time spent in foster care. The second component involves adding assisted guardianship to the permanency continuum when adoption is not possible and a family has made a long-term commitment to the child. This option is proposed as a cost saving alternative to placing children in foster

In establishing a multi-disciplinary team to address parental substance abuse issues, the State anticipates that the services will prevent placement or significantly reduce the duration of placement for 50% of the children in the demonstration units that would come into care because of parental substance abuse. In adding guardianship as a continuum of care option, the State projects that 10 children/youth per year who are currently maintained in long-term foster care will be moved to the guardianship program.

The State proposes to contract with local substance abuse treatment agencies to provide counselors to be colocated with child protective services staff. This effort would provide multidisciplinary assessment and treatment services for approximately 180 families a year for a period of three years.

The second component of the proposal would make guardianship an available alternative to the caretaking families, thus enabling a child's case to be closed while still making financial and other services available to the family as needed. This option would be considered when adoption is not possible and a family has made a long-term commitment to the child/youth.

For the use of a multi-disciplinary team to provide assessment and treatment services, the State is proposing to waive the prohibition on the expenditure of title IV–E funds for services. For the guardianship component, the State seeks to waive provisions governing eligibility for title IV–E foster care maintenance payments, so that caretaking guardians of children formerly in placement might receive payments comparable to title IV–E foster care maintenance payments.

CONTACT PERSON: Kathryn J. Way, Director, Division of Family Services, Delaware Department of Services for Children and Their Families, 1825 Faukland Road, Wilmington, DE 19805, (302) 633–2650, (302) 995–8290 (FAX).

STATE: DISTRICT OF COLUMBIA.

DESCRIPTION: The District of Columbia proposes to develop a community-based therapeutic model of services to serve as an alternative to placing children in more restrictive institutional settings, as well as providing a transitional bridge for those children returning to the community upon discharge from institutional care.

The flexible use of title IV–E and IV–B funds would allow for the development and provision of a community-based model of therapeutic services to prevent foster home and institutional placement and would increase inter/intra agency and multisystem coordination of services.

The demonstration project would include the use of a "managed care" approach through the use of rate setting procedures to include articulated caps, and a system to provide comprehensive multi-system social and support services. The community-based therapeutic approach would include specialized emergency foster care homes; shared family care; in-home treatment; use of professional surrogate parents; and substance abuse treatment services.

The District of Columbia proposes title IV–E waivers to allow payment for services, and to permit the support of alternatives to foster home and institutional placement through use of a rate-setting process to be established under the demonstration project.

CONTACT PERSON: Ricardo Lyles, Acting Administrator, Family Services Administration, District of Columbia Department of Human Services, 609 H Street, NE, Washington, DC 20002, (202) 724–8756, (202) 727–9460 (FAX).

STATE: GEORGIA.

DESCRIPTION: Georgia proposes to use title IV–E funds to fund preventive and supportive services for children and

families at risk, to eliminate the need for placement or reduce the time a child spends in out of home care.

Additionally, Georgia seeks to place children in neighborhood settings; provide specialized living arrangements for adolescents, and obtain special adoption assistance to expedite the placement of children into adoptive homes.

The benefits for this demonstration project include removing systems barriers, decreasing or avoiding the amount of time a child spends in out of home care, providing more stable placements, expanding preventive and family support service systems and increasing adoptive placements by making resources available to adoptive families that otherwise would not qualify.

The services to be provided under the demonstration project include family support and prevention services, expansion of kinship care, and community placement services.

Georgia proposes to expand title IV-E coverage to include placement prevention and reunification services. The State also wishes to waive some provisions of title IV-E eligibility determination when a child comes into custody, provide a special waiver to provide adoption assistance to pay for the purchase of services to expedite adoptive placement, and provide funds for adoptive parents for one-time expenses related to the placement of a specific child in the home. Georgia also seeks a waiver to permit title IV-E funds to support a kinship care assistance subsidy, and a waiver of some provisions of title IV-A to allow families whose children are in foster care to continue receiving food stamps, when reunification is expected to occur within 180 days.

CONTACT PERSON: Doris Walker, Foster Care Unit Chief, Georgia Department of Human Resources, Division of Family and Children Services, Two Peachtree Street, NW., Suite 12–300, Atlanta, GA 30303–3180, (404) 657–3458, (404) 657–3415 (FAX)

STATE: ILLINOIS.

DESCRIPTION: Illinois is proposing a subsidized private guardianship as a permanency planning option which would meet the needs of the long-term kinship care population, in order to reduce the number of children in long-term foster care and to reduce the number of disrupted placements.

Illinois seeks to improve permanency outcomes for children in healthy kinship care arrangements in cases where reunification and adoption are not possible. The demonstration project would reduce government intrusion in family life while creating support and clinical management systems which minimize risk through annual reviews of subsidized private guardianship and continuous promotion of adoption options.

Illinois would provide a subsidized private guardianship program (which parallels the adoption subsidy program) for a random group of eligible

caregivers.

The State proposes a waiver of title IV-E to permit withholding subsidized guardianship from a randomly selected control group; a waiver of certain provisions of the Adoption Assistance Program to authorize subsidized guardianship for children who meet the eligibility requirements of Section 673 and additional requirements set by the State, in order to authorize payment of nonrecurring guardianship expenses, and for guardianship assistance payments for children; a waiver of eligibility requirements to limit assistance to special needs children; a waiver that would permit federal financial participation in amounts expended as guardianship support payments pursuant to guardianship assistance agreements; and a waiver to authorize federal financial participation in amounts expended on training and administration for the subsidized guardianship program and a waiver of the provision defining "adoption agreement" to allow that term to include 'guardianship assistance agreement.''

CONTACT PERSON: Joe Loftus, Executive Deputy Director, Illinois Department of Children and and Family Services, 100 West Randolph, 6th Floor, Chicago, IL 60601, (312) 814–8741, (312) 814–6859 (FAX).

STATE: INDIANA.

DESCRIPTION: Indiana proposes to divert per diem funds from restrictive (primarily institutional) placements to more community-based services in order to create more home-based in-state placements for children, placements which would be more supportive of family unity.

The effort would result in fewer high cost, out of state child placements; fewer removals from home, and earlier reunification; improved family functioning; expeditious adoptions; timely transitions to independent living; and improved outcomes for children.

Indiana would modify existing interagency agreements between the Division of Family and Children Services and juvenile court judges to include community partners such as mental health, education and the Step Ahead Council. The local office of

Family and Children Services, the county probation office, community mental health center or the school corporation seeking placement of a child would convene a meeting of partners to develop alternatives to restrictive placement.

Indiana proposes to waive title IV–E to permit payment of proposed services: even when a child has not been judicially removed from the home; in order to prevent the placement of a child in out of home care; and for the child in substitute care who is not categorically eligible for title IV–E foster care.

CONTACT PERSON: James Hmurovich, Director, Division of Family and Children, Family and Services Administration, Room W392, Government Center south, 402 West Randolph Street, Indianapolis, IN 46204, (317) 232–4705, (317) 232–4490 (FAX).

STATE: MARYLAND.

DESCRIPTION: Maryland proposes to add federal guardianship assistance as a permanency planning option which would more closely meet the needs of the kinship care population.

This effort would result in reduced average length of stay in out of home placement for children; increased stability for children, and empowerment/support for the caretaking family.

Under this demonstration project in order to be eligible a child would have to be committed to the local department of social services as a child in need of assistance and to have been in a successful out of home placement with the prospective guardian for a minimum of six months. Reunification and adoption would have to be appropriately ruled out as permanency planning options. Resources for the child (SSI, Social Security Survivor's Benefits, etc.) would be transferred to the guardian and deducted from the subsidy. Prospective guardians would be required to sign a guardianship agreement which would require annual renewal.

CONTACT PERSON: Fern Blake, Maryland Department of Human Resources, 311 West Saratoga Street, Baltimore, MD 21201–3521, (410) 767–7269, (410) 333–0099 (FAX).

STATE: MICHIGAN.

DESCRIPTION: Michigan proposes to increase its emphasis on family preservation and family support services and decrease the need for and reliance on out of home care by using title IV–E funds to provide services.

The effort would result in controlled growth of title IV–E maintenance

expenditures; greater collaboration among federally-funded programs; increased ability to provide services for families; and decreased reliance on out of home care.

Michigan is proposing to treat title IV–E maintenance payments (other than those for adoption subsidy) as a capped entitlement. The State is proposing to use the funds for service provision, in some cases augmenting funds now being expended under title IV–B Subpart 1 (Child Welfare Services) and Subpart 2 (Family Preservation and Support). The funds would be used to expand grants to local communities and to implement family preservation and support services more quickly.

Michigan is proposing to waive those provisions of title IV–E which restrict States from expending these funds for the provision of services. Michigan excludes title IV–E adoption assistance from its waiver proposal.

CONTACT PERSON: David Berns, Director, Office of Children's Services, Michigan Department of Social Services, 235 South Grand Avenue, P. O. Box 30037, Lansing, MI 48909, (517) 335–6159, (517) 241–7047 (FAX).

STATE: MINNESOTA.

DESCRIPTION: Minnesota proposes to establish relative-based living arrangements as an alternative to out of home care.

The results of this project would be enhanced permanency for children including maintaining a continuity of relationships and a sense of belonging; protection for children who are at risk; lessened government intrusion into families; a greater connection for children with their families and communities; support for kinship placements; lessened time in substitute care; multiple placements will be reduced; and expenditures for out of home placement will be contained.

The proposed demonstration project focuses on placement with family members and would provide support for temporary relative guardianship; permanent relative guardianship; voluntary relative foster care; and court-ordered relative foster care.

Minnesota proposes waivers of provisions under title IV–E in order to exclude grandparents from the foster care licensing requirements; and approval of a financial support structure that allows differential payments based on need. Specific services under this waiver project would include guardianship subsidies, differential foster care support, and specialized training for relative caregivers.

The State also proposes waivers of certain provisions of title IV–A in order

to apply the special child standard of assistance in situations where the child is living in one of a range of relative care arrangements; and flexibility to use emergency assistance funds to help relative caregivers meet minimum health and safety standards. Specific services under this waiver would include guardianship, subsidies and alternative care grants.

CONTACT PERSON: Robert DeNardo, Supervisor, Family and Children's Service Division, Minnesota Department of Human Services, 444 Lafayette Road North, St. Paul, MN 55112–3831, (612) 296–5288, (612) 297–1949 (FAX).

STATE: NEW YORK.

DESCRIPTION: New York proposes to use a managed care approach to child welfare services to recapture revenue for reinvestment in preventive and aftercare services in local communities.

The benefits of this effort would be an accelerated decline in the foster care population; an increase in the level of services; and a reduction in the length of stay in foster care.

New York proposes to apply the principles of managed care to its foster care and adoption assistance programs by identifying preset payments for a range of services for a specified population over a predetermined period of time (capitated payments) and adjusting treatment regimens in light of outcomes so that the client receives the necessary services to continue to make progress toward the stated goals of intervention (care management). The State also proposes to increase the availability of child welfare services so that pre-placement preventive and aftercare services can be intensified.

New York proposes to waive: title IV—E requirements regarding the eligibility of children and of foster care facilities; the definition of "special needs" for which title IV—E funds may be used; the circumstances under which these funds may be claimed; and certain requirements concerning title IV—E administration and training.

CONTACT PERSON: Fred Wulczyn, Office of Family and Children Services, Division of Services and Community Development, New York State Department of Social Services, 40 North Pearl Street, Albany, NY 12243–0001, (518) 486–3431, (518) 474–9004 (FAX).

STATE: NORTH CAROLINA.

DESCRIPTION: North Carolina proposes outcome-based management of foster care, in which foster care funding is tied to specific outcomes related to diverting children from foster care whenever possible and moving quickly to achieve permanence for children.

The benefits from this demonstration effort would: link funding and outcomes and measure the effect on service delivery system performance; demonstrate and evaluate the effectiveness of a comprehensive outcome-based approach; decrease the amount of time children spend in foster care, reduce the number of new entries into foster care, and promote collaborative planning and coordination of services with several other initiatives currently underway in the State.

The proposed demonstration effort has two parts. Part I is designed to encourage the development of effective community-based reunification, adoption and aftercare services. Part II is designed to achieve a paradigm shift that allows local programs to move resources from treatment to prevention.

The waiver requests the use of title IV–E foster care funds on behalf of children not presently eligible: to allow local social service agencies to use a capitated rate structure with incentives for achieving specified outcomes; to allow local social service agencies to contract with public, private non-profit and private for profit entities as needed to develop an effective community network of services; and to allow participating agencies to reinvest savings realized from performance excellence in child welfare services.

CONTACT PERSON: Chuck Harris, North Carolina Department of Human Resources, Division of Social Services, 325 Salisbury Street, Raleigh, NC 27603, (919) 733–9467, (919) 715–0024 (FAX). STATE: OHIO.

DESCRIPTION: Ohio proposes to reduce child removals and/or time of children in placement and associated costs through the use of managed care technology to provide a broader array of services to children and their families.

The benefits of this effort would include decreasing placement costs, increasing the level and quality of services; strengthening local partnerships; and expediting the permanency planning process.

The proposed demonstration effort represents a partnership between public children's service agencies (PCSAs), the Ohio Department of Human Services (ODHS), and managed care entities (MCE). Decision making and risk will be shared among the PCSAs, ODHS and the MCE. ODHS's role is that of coordinator, facilitator and provider of training and technical assistance. The PCSAs' role is primarily as purchasers of services, and they may or may not provide all the direct service functions themselves. The MCE will be responsible for administrative and management

functions, medical/clinical reviews, utilization management and service authorization, developing and operating a management information system, developing contracts with providers and payers, and consumer satisfaction-related duties.

The current system of services will continue but with managed care options being considered at decision making points. A policy consortium will be created to develop and implement policy and practices that support permanency planning and provide guidance to the local PCSAs. The terms and conditions developed by the Consortium will bind the provider agencies to uniformly implement the agreed upon practice criteria and to ensure consistency for evaluation purposes across the waiver sites.

Ohio proposes to waive a number of title IV–E provisions that relate to restrictions on child eligibility, and prohibitions on the use of title IV–E funds for the provision of services.

CONTACT PERSON: Isaac Palmer, Deputy Director, Office of Child Care and Family Services, Ohio Department of Human Services, 30 East Broad Street, Columbus, OH 43266–0423, (614) 466–1213, (614) 466–9247 (FAX).

STATE: OREGON.

DESCRIPTION: Oregon proposes to use title IV–E funds for services including but not limited to prevention and support services, protective services, crisis intervention and reunification services. The State also proposes to develop a kinship foster care rate that would be individually determined based on the needs of the child.

The demonstration project would provide flexible funding for abused and neglected children and their families and/or caregivers to receive individual services, regardless of where the chid is placed. Specific outcomes expected would include decreasing the length of foster care placement, increasing the number of children remaining safely in their homes, increasing the use of relative caretakers for children who must be placed out of the home, having more appropriate foster care resources and better utilization of community resources.

The proposed demonstration project would provide support to biological, foster and kinship caretakers through a myriad of services. The State proposes to shift toward a statewide system of inhome care services delivery, insure a match between the child's needs and the skill of the caretakers, establish mechanisms that will refocus the out of home care systems and move closer to implementation of a "first placement/

only placement" objective for children who are unable to remain with their parent(s).

Oregon proposes to waive those provisions of title IV–E: that require a State to make foster care maintenance payments; that require that foster care maintenance payments be made only on behalf of a child who resides in a foster family home or a child care institution; and that concern the conditions for federal reimbursement for voluntary placements.

CONTACT PERSON: Richard Schoonover, State Office of Services for Children and Families, Oregon Department of Human Resources, 500 Summer Street, NE, Salem, OR 98310–1017, (503) 945–6882, (503) 328–3800 (FAX).

STATE: WEST VIRGINIA.

DESCRIPTION: West Virginia will create a comprehensive, decentralized, specialized system to determine a child's potential eligibility for all funding resources for child welfare programs.

The proposed system would maximize the State's child welfare funds by identifying and accessing additional financial resources available to children in care. The new system would emphasize parental obligation and encourage parental participation.

A resource development unit will be created to identify, pursue and produce accurate claims for all sources of funds to which a child in care may be entitled, e.g., child support, SSI, Black Lung, Railroad Retirement, third party medical, SSA, Veterans's Benefits and titles IV–A, IV–B and IV–E.

West Virginia is requesting a waiver of the title IV–E limit of fifty percent for Federal Financial Participation in a State's administrative costs.

CONTACT PERSON: Mary Jarrett, West Virginia Department of Health and Human Resources, Office of Social Services, Bldg. 6, Room B–850, State Capitol Complex, Charleston, WV 25305, (304) 558–7980, (304) 558–8800 (FAX).

III. Requests for Copies of a Proposal

Requests for copies of a Child Welfare Waiver Demonstration Project proposal should be directed to the appropriate State at the telephone number given above. Questions concerning the content of a proposal should be directed to the State contact listed for the proposal.

(Catalog of Federal Domestic Assistance Program, No. 93.645, Child Services—State Grants; 93.658, Foster Care Maintenance; 93.659, Adoption Assistance) Dated: August 31, 1995.

Joseph A. Mottola,

Acting Commissioner, Administration on Children, Youth and Families.

[FR Doc. 95–22230 Filed 9–6–95; 8:45 am]

BILLING CODE 4184-01-P

Agency for Health Care Policy and Research

Meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation

AGENCY: Agency for Health Care Policy and Research.

ACTION: Notice of public meeting.

SUMMARY: In accordance with section 10(a) of the Federal Advisory Committee Act, this notice announces a meeting of the National Advisory Council for Health Care Policy, Research, and Evaluation.

DATES: The meeting will be on Thursday, September 28, from 8:30 a.m. to 5:30 p.m.

ADDRESSES: The meeting will be held at the DoubleTree Hotel, 300 Army-Navy Drive, Arlington, VA 22202.

FOR FURTHER INFORMATION CONTACT: Deborah L. Queenan, Executive Secretary of the Advisory Council at the Agency for Health Care Policy and Research, 2101 East Jefferson Street, suite 603, Rockville, Maryland 20852, (301) 594–1459.

In addition, if sign language interpretation or other reasonable accommodation for a disability is needed, please contact Linda Reeves, the Assistant Administrator for Equal Opportunity, AHCPR, on (301) 594–6665 no later than September 20.

SUPPLEMENTARY INFORMATION:

I. Purpose

Section 921 of the Public Health Service Act (42 U.S.C. 299c) establishes the National Advisory Council for Health Care Policy, Research, and Evaluation. The Council provides advice to the Secretary and the Administrator, Agency for Health Care Policy and Research (AHCPR), on matters related to AHCPR activities to enhance the quality, appropriateness, and effectiveness of health care services and access to such services through scientific research and the promotion of improvements in clinical practice and in the organization, financing, and delivery of health care services.

The Council is composed of public members appointed by the Secretary. These members are: Robert A. Berenson, M.D.; F. Marian Bishop, Ph.D.; Linda

Burnes Bolton, Dr.P.H.; John W. Danaher, M.D.; Helen Darling, M.A.; Nancy J. Kaufman, M.S.; William S. Kiser, M.D.; Robert M. Krughoff; Risa J. Lavizzo-Mourey, M.D.; W. David Leak, M.D.; Harold S. Luft, Ph.D.; Barbara J. McNeil, M.D.; Walter J. McNerney, M.H.A.; Edward B. Perrin, Ph.D.; Louis F. Rossiter, Ph.D.; Albert L. Siu, M.D.; and Ellen B. White, M.B.A.

There also are Federal ex officio members. These members are:
Administrator, Substance Abuse and Mental Health Services Administration; Director, National Institutes of Health; Director, Centers for Disease Control and Prevention; Administrator, Health Care Financing Administration; Commissioner, Food and Drug Administration; Assistant Secretary of Defense (Health Affairs); and Chief Medical Director, Department of Veterans Affairs.

II. Agenda

On Thursday, September 28, 1995, the meeting will begin at 8:30 a.m. with the call to order by the Council Chairman. The Administrator, AHCPR, will update the status of current Agency issues and program initiatives followed by Council discussion. The meeting will adjourn at 5:30 p.m.

Agenda items are subject to change as priorities dictate.

Dated: August 30, 1995.

Clifton R. Gaus, D. Sc.,

Administrator.

[FR Doc. 95–22220 Filed 9–6–95; 8:45 am] BILLING CODE 4160–90–M

National Institutes of Health

Technology Assessment Conference on Integration of Behavioral and Relaxation Approaches Into the Treatment of Chronic Pain and Insomnia

Notice is hereby given of the NIH Technology Assessment Conference on "Integration of Behavioral and Relaxation Approaches Into the Treatment of Chronic Pain and Insomnia," which will be held October 16–18, 1995, in the Natcher Conference Center of the National Institutes of Health, 9000 Rockville Pike, Bethesda, Maryland 20892. The conference begins at 8:30 a.m. on October 16, at 8 a.m. on October 17, and at 9 a.m. on October 18.

Millions of Americans are afflicted with persistent medical disorders that involve behavioral and psychological components. Chronic pain and insomnia are two of the more common disorders with such involvement. Despite the acknowledged importance